

10/03/03  
16367 U.S. PTO

# UTILITY PATENT APPLICATION TRANSMITTAL

(New Nonprovisional Applications Under 37 CFR § 1.53(b))

EXPRESS MAIL # ER 454373205 US

Attorney Docket No.

009.6001 (P-11290.00)

03945 U.S. PTO  
10/678402

100303

## TO THE ASSISTANT COMMISSIONER FOR PATENTS:

Transmitted herewith is the patent application of ( ) application identifier or (X) first named inventor, Keith Alan Miesel, entitled SYSTEM, APPARATUS AND METHOD FOR INTERACTING WITH A TARGETED TISSUE OF A PATIENT, for a(n):

(X) Original Patent Application.

( ) Continuing Application (prior application not abandoned):

( ) Continuation ( ) Divisional ( ) Continuation-in-part (CIP)

of prior application No: \_\_\_\_\_ Filed on: \_\_\_\_\_.

( ) A statement claiming priority under 35 USC § 120 has been added to the specification.

Enclosed are:

(X) Specification; 28 Total Pages. (X) Informal Drawing(s); 5 Total Sheets.

(X) Oath or Declaration:

(X) A Newly Executed Combined Declaration and Power of Attorney:

( ) Signed. (X) Unsigned. ( ) Partially Signed.

( ) A Copy from a Prior Application for Continuation/Divisional (37 CFR § 1.63(d)).

( ) Incorporation by Reference. The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied, is considered as being part of the disclosure of the accompanying application and is hereby incorporated herein by reference.

( ) Signed Statement Deleting Inventor(s) Named in the Prior Application. (37 CFR § 163(d)(2)).

( ) Assignment and Recordation Cover Sheet.

( ) Power of Attorney.

( ) Associate Power of Attorney.

( ) Preliminary Amendment.

( ) A Duplicate Copy of this Form for Processing Fee Against Deposit Account.

( ) A Certified Copy of Priority Documents (if foreign priority is claimed).

( ) Applicant claims small entity status.

(X) Information Disclosure Statement and Form PTO/SB/08.

(X) Return Receipt Postcard.

(X) A Check in the amount of \$ 1010.00 for the Filing Fee.

( ) Other: \_\_\_\_\_

CLAIMS AS FILED				
FOR	NO. FILED	NO. EXTRA	RATE	FEE
Total Claims	24	4	\$18.00	\$ 72.00
Independent Claims	4	1	\$84.00	\$ 84.00
Multiple Dependent Claims (if applicable)				\$0.00
Assignment Recording Fee				\$0
Basic Filing Fee				\$770.00
Total Filing Fee				\$926.00

Charge \$ 0 to Deposit Account 50-2091 pursuant to 37 CFR § 1.25. At any time during the pendency of this application, please charge any fees required or credit any overpayment to Deposit Account 50-2091.

Respectfully submitted,

By: \_\_\_\_\_

Gary W. Hoshizaki  
Reg. No. 37,356

Date: 10/3/03

Correspondence Address:

CUSTOMER NO. 29,906